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TRANSMITTAL FORM					Application Number		10/	10/772,163		
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Total Number of Pages in This Submission 4				Attorney Docket Number		00:	0023.0016			
ENCLOSURES (Check all that apply)										
Fee Transmittal (pages) Drawings - FIGS. 1- (pages)									s)	
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT										
Firm Name Isaacson, Irving. Stelacone & Prass, LLC										
Signature										
Printed Name Jay A. Stelacone						Ph	lo. 42.168			
Date October 24, 2006 Reg. No. 42,168										
CERTIFICATE OF FACSIMILE TRANSMISSION										
I hereby certify that this Transmittal Form and the above-identified correspondence are being facsimile transmitted to the USPTO's Central FAX Number (571-273-8300) on the date shown below:										
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Typed or printed name Angela Thumann						Date	e October 24, 2006			